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Under the Par	erwork Reduction	Act of 1995	, no person are re	quired to	respond to a collection of information unless it displays a valid OMB control number.				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known           Application Number         10/643,908-Conf. #4752				
FEE TRANSMITTAL For FY 2006							August 20, 2003		
					Filing Date First Named Inventor		Masayuki NAKAYASU		
					Examiner Name		D. R. Dunn		
Applicant claims small entity status. See 37 CFR 1.27							616		
TOTAL AMOUNT OF PAYMENT (\$) 120.00					Artonic		0425-1069P		
·					Alloney Docket No.				
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		FILIN	IG FEES	SE	ARCH FEES	EXAMIN	ATION FEES		
Application Ty	<u>/pe</u>	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	<del>-</del>	300	150	500	250	200	100		
Design		200	100	100	50	130	65		
Plant		200	100	300	150	160	80		
Reissue		300	150	500	250	600	300		
Provisional		200	100	0	0	0	0		
									Small Entity
Fee Description Fee (\$)									
Each claim over 20 (including Reissues)								50	25
Each independent claim over 3 (including Reissues)								200	100
Multiple dependent claims					m			360	180
Total Claims Extra Claims			Fee (\$)	Fee Paid (\$)		Multiple Depend Fee (\$)			-
HP = highest num	- = ber of total claims	x paid for, if o	= preater than 20.	<del> </del>	<del></del>	<u>Fe6</u>	<u>⇒ (⊅)</u> !	ee Paid (	<u>का</u>
Indep. Claims	Extra Cla		Fee (\$)	Fee	Paid (\$)	<del></del>			
3	- =	x	=		· · · · · · · · · · · · · · · · · · ·				
	ber of independen	t claims pai	id for, if greater tha	n 3.					
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00									
SUBMITTED BY	7,,,	M,			In				
Signature	Registration No. (Attorney/Agent) 29,271 Telephone (703) 205-8000							05-8000	
Name (Print/Type)	ype) Charles Gorenstein Date August 21, 2006								21, 2006